

Marion County Election Board

ELIZABETH L. WHITE, SECRETARY



TEL: (317) 327-5100

FAX: (317) 327-4815

www.indygov.org/clerk/election

March 30, 2007

Dear Candidate Committee:

Indiana election law dictates that you have a campaign finance report due in APRIL to the Marion County Election Board.

The 2007 Pre-Primary Report (CFA-4) is due on April 20, 2007 by NOON. This report covers the period of January 1, 2007 through April 13, 2007. If you have received this notice, you are required to submit a campaign finance report for this period.

Your committee may also be required to file the 2007 Primary Election Supplemental Report (CFA-11). This report covers the period of April 14, 2007 through May 6, 2007 (6 a.m.) and should reflect single contributions of \$1,000 or more. The CFA-11 is due *within 48 hours of receipt* of the large contribution.

Penalties: (IC 3-9-4-16) As before, all reports are due no later than noon on any deadline day. Under current legislation, the County Election Board *must* fine any committee filing delinquent reports (beginning 12:01 on deadline day) \$50 per day (including weekends and holidays) up to \$1000.

If you have any questions or need a *2007 Indiana Campaign Finance Manual*, you may call the Election Board office at (317) 327-5100. Thank you for your attention to this matter.

Sincerely,

A handwritten signature in cursive script, appearing to read "A. Mallon".

Andrew Mallon
Director of Elections
Marion County Election Board

Encl.: CFA-4; CFA-11; 2007 reporting schedule

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Lincoln Plowman
7915 S Emerson Ave
#296
Indpls., IN 46237

2. Article Number
(Transfer from service label)

110010520 0013 3238 71379

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

J. McW

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

9-6

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below:

☐ No

3. Service Type

☒ Certified Mail☐ Express Mail☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. ~~Also complete~~ item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
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1. Article Addressed to:

Lincoln Plowman
Lincoln Plowman Committee
7915 S. Emerson Ave. #296
INDIANAPOLIS, IN 46237-

2. Article Number

(Transfer from service label)

7003 2260 0005 7377 3943

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Chris Peltard*

☐ Agent

☐ Addressee

B. Received by (Printed Name)

Charissa Rexroat

C. Date of Delivery

1-7

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below: ☐ No

*7915 S. Emerson Ave
Indpls, IN 46237*

3. Service Type

☒ Certified Mail

☐ Express Mail

☐ Registered

☒ Return Receipt for Merchandise

☐ Insured Mail

☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

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[Redacted Address]	
Postage \$	Postmark Here
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees \$	
Recipient's Name (Please Print Clearly) (To be completed by mailer)	
Lincoln Plouman	
Street, Apt. No.; or PO Box No.	
City, State, ZIP+4	
PS Form 3800, February 2000 See Reverse for Instructions	

7003 2260 0005 73A5 814

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Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$
Postmark Here	
Sent To <u>Lincoln Plowman</u>	
Street, Apt. No., or PO Box No.	
City, State, ZIP+4	
PS Form 3800, January 2002 Edition PSN 7530-01-000-9000	